श्री सभापति: आप सवाल पूछ लीजिए। वक्त खत्म हो रहा है।

श्री नंदी येल्लैया: दूसरा मैं यह चाहता हूँ कि जैसे आज हमारे आंध्र प्रदेश में एक बड़ा मिसाल है कि हमने वहाँ पर 'आरोग्य श्री' नामक एक स्कीम प्रिजेंट किया ...(व्यवधान)...

श्री सभापति: आप सवाल पूछ लीजिए।

श्री नंदी येल्लैया: सर, यह हैल्थ का मामला है। ...(व्यवधान)...

श्री सभापति: वक्त खत्म हो जाएगा। ...(व्यवधान)... आपको जवाब भी नहीं मिलेगा।

श्री नंदी येल्लैया: सर, आंध्र प्रदेश में "आरोग्य श्री" एक बहुत सक्सेसफुल स्कीम रही। आप दलितों और मुस्लिमों के लिए कुल 310 डिस्ट्रिक्ट्स में इसे लागू कर रहे हैं। मैं माननीय हैल्थ मिनिस्टर साहब से यह पूछना चाहता हूँ कि जहाँ पर दलित रहते हैं और जहाँ पर अनुसूचित जाति के लोग रहते हैं, क्या वहाँ पर आपके डॉक्टर्स ईमानदारी से फंक्शन कर रहे हैं? ...(व्यवधान)...

MR. CHAIRMAN: Question, please. *(Interruptions)*.. प्लीज़ आप बैठ जाइए। ...(व्यवधान)... आपका सवाल खत्म हो गया? ...(व्यवधान)... Please let's have the answer.

श्री गुलाम नबी आज़ाद: सर, जहाँ तक आंध्र प्रदेश का सवाल है, मेरे ख्याल में हमारे देश में दो-तीन राज्य ही ऐसे हैं जिनमें आंध्र प्रदेश भी एक है। एक तमिलनाडु और दूसरा आंध्र प्रदेश ऐसे ही राज्य हैं, जहाँ एम्बुलेंस का सबसे एफिशिएंट सिस्टम इस वक्त चल रहा है। इमरजेंसी मेडिकल रिसर्च इंस्टीट्यूट, जो सत्यम कम्प्यूटर ने शुरू किया था और जिसका लाभ अब तकरीबन 10-12 राज्य उठा रहे हैं, लेकिन सबसे पहले ...(व्यवधान)... अब सत्यम से इसे GBK ने ले लिया है। इसलिए आप सत्यम की बात नहीं करिए, लेकिन अच्छा काम कोई भी कर सकता है। इसका एक GPS सिस्टम है जहाँ सैंकड़ों गाड़ियाँ हैं। जैसे आप टैक्सी को बुला लेते हैं, उसी तरह से 10-15 मिनट्स के अन्दर स्टेट के अन्दर कहीं भी गाड़ी पहुँच सकती है। मैं यह कहूँगा कि आंध्र प्रदेश में इस वक्त एम्बुलेंस का यह सिस्टम सबसे अच्छा चल रहा है।

MR. CHAIRMAN: Thank you very much. Question Hour is over.

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WRITTEN ANSWERS TO STARRED QUESTIONS

Deaths due to Swine Flu

*24. SHRI N.R. GOVINDARAJAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) how many cases of H1N1 infection have been reported in our country so far;

(b) whether it is a fact that more than 20,000 persons have been infected in more than 50 countries with Swine Flu and 117 deaths have been reported so far; and

(c) if so, the details thereof and the steps taken by Government to tackle the deadly virus?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) Yes, Sir. As on 30th June, 2009, there have been 109 laboratory confirmed cases of Influenza A H1N1[Swine] in our country.

(b) World Health Organisation has reported 70893 laboratory confirmed cases of influenza A/H1N1 infection from 116 countries. There have been 311 deaths [as on 29th June, 2009].

(c) On World Health Organization information about the influenza A/H1N1 [earlier referred as Swine Flu], Government of India took a series of actions, A comprehensive plan including guidelines and standard operating procedures were put in place. Travel advisory was issued to defer non essential travel to the affected countries. Entry screening of passengers started at 22 international airports and five international checkpoints through and informative health screening card and still continuing. On an average, 45,000 passengers are screened daily. About 27 lakh passengers have been screened. 211 passengers with symptoms were isolated in identified health facilities and tested for influenza A/H1N1 infection. The communication efforts have resulted in nearly 500 passengers with symptoms self reporting [as on 30th June, 2009].

All those tested positive are travel related, except for nine who got the infections being close contacts of those who travelled from abroad. All the cases have been detected early, put on treatment and cured. Out of these, 70 have been discharged as on 30th June, 2009. The family and social contacts of the positive cases are traced and put on preventive medication. Timely institution of public health measures have prevented community spread so far.

Community surveillance to detect clusters of influenza like illness is being done through Integrated Disease Surveillance Project which has pan India presence. National Institute of Communicable Diseases, Delhi and National Institute of Virology, Pune, are testing clinical samples. Sixteen additional laboratories have also started testing for influenza A H1N1 from 1st of July, 2009.

All States have been requested to gear up the State machinery and strengthen isolation facilities including critical care facilities at district level. In addition to trained rapid response teams and team of physicians at state level, district level teams are undergoing training to investigate outbreak and to manage them. Professional bodies such as Indian Medical Association, Indian Academy of Pediatrics and National Academy of Medical Sciences have been involved for continuing medical education of doctors in the private sector.

There is adequate quantity of Oseltamivir, the drug recommended by World Health Organization. Ten million capsules are in stock. Another six million is in stock as banking arrangement with pharmaceutical companies. Stockpile of personal protective equipments is increased from one lakh to ten lakhs. These medical supplies have been decentralized which would be taken up to district level. The Committee under Secretary (Health Research) has explored the possibility of producing a vaccine for H1N1 influenza. Three manufacturers have been given license to import the seed virus for manufacturing the vaccine.

The Task Force in Information and Broadcasting Ministry has already undertaken short term media campaign. The materials prepared by the Ministry with assistance from UNICEF, after approval of the Task Force, are appearing in print and visual media. A comprehensive long term media plan in consultation with Directorate of Advertising and Visual Publicity has been drawn up. The plan covers both electronic and print media which would run throughout the year.

Travel advisory, do's and don'ts and other pertinent information has been widely published to alley fear ad avoid panic. Media is kept informed on daily basis.

The pandemic preparedness and response calls for actions in sectors beyond health. National Disaster Management Authority has issued guidelines for such actions.

Government is fully geared up to deal with the situation.

Hijacking of train

*26. SHRI RAJKUMAR DHOOT: Will the Minister of RAILWAYS be pleased to state:

(a) whether it is a fact that unauthorized person/persons drove a local train that was later involved in a head-on collision with a train coming from opposite side near Chennai on 29 April, 2009;

(b) if so, the details thereof;

(c) the details of casualties and damages;

(d) the amount of compensation paid to all those who suffered;

(e) whether it was an act of terrorism; and

(f) the action taken against Railway staff, whose negligence caused the hijack of the train?

THE MINISTER OF RAILWAYS (KUMARI MAMATA BANERJEE): (a) to (f) Yes, Sir. As per the Preliminary Report of the statutory inquiry conducted by the Commission of Railway Safety, Southern Circle, the accident was caused due to an unknown person taking control of an Electrical Multiple Unit (EMU) Rake which was available on Platform No. 14 at Chennai Moore Market Complex awaiting schedule departure at 5.15 hours on 29th April, 2009. Before the booked crew could reach the respective Cabin of the Electrical Multiple Unit Rake, the unknown person started the engine of the Electrical Multiple Unit at 04.58 hours, entered the wrong line accelerating at a very high speed of 85-90 kilometer per hour and collided at Vysarpadi Jeeva Station with a goods train which was standing at the station due to signal being red. Identify of the person who had taken the Electrical Multiple Unit is yet to be established. The investigation has been entrusted to CB-CID of Tamil Nadu, the report of which is awaited.